

Frequently Asked Questions (FAQs)

What is Other Health Insurance (OHI)?

Other health insurance (OHI) is any health insurance policy (e.g., medical or pharmacy) other than TRICARE, TRICARE Supplemental plans, Medicare, Medicaid, and certain government sponsored programs, that a beneficiary may carry through an employer or private insurance company. Any OHI in addition to TRICARE coverage is considered to be the primary health insurance. Under federal law, MTFs are authorized to collect from third-party payers the reasonable charges for medical services provided to Uniform Services beneficiaries, excluding active duty. The funds collected return directly to the operation and maintenance budget of the MTF where the care was delivered and are used to improve the quality of healthcare. Often the funds allow the continuation of programs or purchasing of equipment at the facilities for which there would otherwise not be funding.

What is the DD Form 2569, and why do I need to fill it out?

The DD Form 2569 is the form DoD beneficiaries must complete or update to verify the presence or absence of OHI. The information provided on the DD Form 2569 is used to properly route a healthcare claim to the DoD beneficiary's private insurance carrier.

Who has to fill out this form?

All DoD beneficiaries, excluding active duty, are required to fill out the DD Form 2569. This includes but is not limited to Active Duty family members, retirees, and family members of retirees.

How often do I have to fill out the form?

At every visit, DoD beneficiaries are required to verify the presence or absence of other health insurance. A DD Form 2569 must be completed annually and/or when insurance coverage changes. As the Affordable Care Act is implemented beginning in January 2014, health plans and third party payers may be updating policy identification numbers or other information (e.g., coverage) or cancelling and reissuing policies. Please verify that you have the most up-to-date health insurance information from your insurance provider and make sure it is reported on the DD Form 2569.

What are my responsibilities?

Provide information regarding OHI coverage. Information collected includes:

- Policy name and number
- Coverage type
- Patient relationship to insured
- Policy effective dates

Note: If you have OHI, it will not impact your MTF access or ability to receive care. However, if you intentionally provide false information or willingly fail to provide OHI information, those are grounds for disqualification for health care services from facilities of the Uniformed Services.

Will I get a bill if OHI does not pay or pays only a portion of the MTF bill?

No; beneficiaries who receive care at an MTF will not be billed except for subsistence costs of an inpatient stay. OHI may deduct payment for any copay or cost share amounts, but you will not be billed for any amounts that cannot be collected from OHI.

